

05/25/01



1044 U.S. PTO

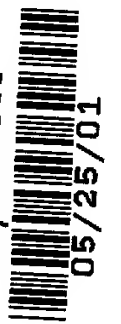
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PTO/SB/05 (08-00)

|   |   |  |
|---|---|--|
| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small> | <i>Attorney Docket No.</i>                                    | <b>045161.0000</b>   |
|   | <i>First Named Inventor<br/>or<br/>Application identifier</i> | <b>John H. Stevens</b>   |
| <b>ADDRESS TO:</b><br>Assistant Commissioner of Patents<br>Box Patent Application<br>Washington, DC 20231                               | <i>Title</i>  | <b>Financial Excellence Indicator System of Texas -<br/>Information About Education Resources (FEISTIER)</b> |
|   | <i>Express Mail No.</i>                                       | <b>EL813906930US</b>   |

PTO  
09/866140  
JC872 U.S. PTO



05/25/01

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents

- 1. ☒ Fee Transmittal Form PTO/SB/17 (submit in duplicate)
- 2. ☒ Applicant claims small entity status. See 37 CFR 1.27.
- 3. ☒ Specification [Total Pages: 52]
- 4. ☒ Drawing(s) (35 USC 113) [Total Sheets: 37]
- 5. ☒ Oath or Declaration [Total Pages: 3]
  - a. ☐ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63(d))  
*(for continuation/divisional with No. 17 completed)*
    - [Note No. 6 below]
    - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- 6. ☐ **Incorporation By Reference** (useable if No. 5b is checked)  
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under No. 5b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.
- 7. ☐ **Nucleotide and/or Amino Acid Sequence Submission** (if applicable, all necessary)
  - a. ☐ Computer Readable Copy (CRF)
  - b. ☐ Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statement verifying identity of above copies
- 8. ☐ Application Data Sheet. See 37 CFR 1.76

- 9. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

**ACCOMPANYING APPLICATION PARTS**

- 10. ☒ Assignment Papers (cover sheet & document(s))
- 11. ☐ 37 CFR 3.73(b) Statement (when there is an assignee)
- 12. ☒ Power of Attorney
- 13. ☐ English Translation Document (if applicable)
- 14. ☐ Information Disclosure Statement (IDS)/PTO-1449  
☐ Copies of IDS Citations
- 15. ☐ Preliminary Amendment
- 16. ☒ Return Receipt Postcard (Itemized)
- 17. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
- 18. ☒ Other: Check for \$395 \_\_\_\_\_

- 19. If a CONTINUING APPLICATION, check appropriate blank and supply the requisite information:

|   |   |
|---|---|
| <input type="checkbox"/> Continuation               | of prior application No.: _____ / _____ |
| <input type="checkbox"/> Divisional                 | Prior Application Information: _____    |
| <input type="checkbox"/> Continuation-in-part (CIP) | Examiner _____ Group Art Unit: _____    |

|  |   |           |                |          |                |
|--|---|-----------|----------------|----------|----------------|
| <b>20. Correspondence Address</b>  |   |           |                |          |                |
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label _____ or _____ Correspondence address below<br>020790<br>(Insert Customer No. or Attach bar code label here) |   |           |                |          |                |
| Name   | Attn: Gary W. Hamilton<br>AKIN, GUMP, STRAUSS, HAUER & FELD, L.L.P. |           |                |          |                |
| Address  | 816 Congress Avenue, Suite 1900                                     |           |                |          |                |
| City   | Austin  | State     | Texas          | Zip Code | 78701          |
| Country  | U.S.A.  | Telephone | (512) 499-6200 | Fax      | (512) 703-1112 |

Date: May 25, 2001

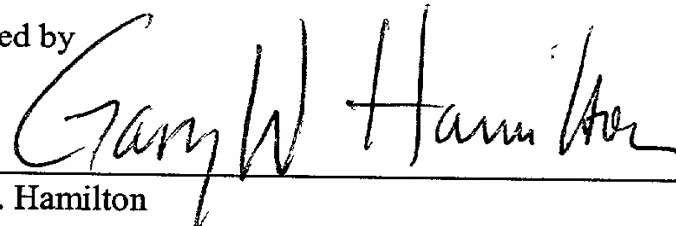
Gary W. Hamilton  
Gary W. Hamilton

|   |        |                          |                 |
|---|--------|--------------------------|-----------------|
| <b>FEE TRANSMITTAL</b><br><b>for FY 2001</b><br><i>Patent fees are subject to annual revision</i> |        | <b>Complete if Known</b> |                 |
|   |        | Application Number       |                 |
|   |        | Filing Date              |                 |
|   |        | First Named Inventor     | John H. Stevens |
|   |        | Examiner Name            |                 |
|   |        | Group / Art Unit         |                 |
| Total Amount of Payment   | \$ 395 | Attorney Docket No.      | 045161.0000     |

| <b>METHOD OF PAYMENT (check one)</b>  |                       |   |                       |  |          | <b>FEE CALCULATION (continued)</b>   |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
|---|-----------------------|---|-----------------------|--|----------|--|-------|-------------|----------|-------|-------------|---------------|--------------|----------------|--------------|-----------------|----------|--------------------|--------|-----|-------|------------------------------|-----------------------|-----------------|-------|------|------------------------|--|-------|-----------------------------------|---------|--------|---------------------------------------|---------------------------|-------|---|--------|------|---|--|----|-----|--|-----|---------|---|----|-----|----------------|-----------------------|----------------|--|-----------------|----------|--------|-------|--------|---|--------------------|-----|--------|-------|--------|--|-------------------|-----|---------|-------|--------|---|------------------|-----|---------|-------|--------|--|--------------------|-----|--------|-------|--------|------------------|------------------------|-----|---------------------|-----|--------|--|----|-------|--------|-----|--------|--------------------------|----|-----|--------|-----|-------|----------------------------------|----|-----|---------|-----|--------|------------------------------------|----|-----|---------|-----|--------|--------------------------------|----|-----|--------|-----|--------|------------------|----|-----|--------|-----|--------|-----------------|----|-----|--------|-----|--------|-------------------------------|----|-----|-------|-----|-------|---|----|-----|--------|-----|--------|--|----|-----|-------|-----|-------|--|------|-----|--------|-----|--------|---|----|-----|--------|-----|--------|---|----|-----|--------|-----|--------|---|----|----------------------|--|--|--|--|----|----------------------|--|--|--|--|----|------------------------------------|--|--|--|--|--|---------------------|--|--|--|--|-------|
| 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:<br>Deposit Account No.: <u>01-0660</u><br>Deposit Account Name:<br><u>Akin, Gump, Strauss, Hauer &amp; Feld, L.L.P.</u><br><input checked="" type="checkbox"/> Charge any additional Fee Required Under 37 CFR §§ 1.16 & 1.17<br><input checked="" type="checkbox"/> Applicant claims small entity status.<br>See 37 CFR 1.27   |                       |   |                       |  |          | <b>3. Additional Fees</b><br><table border="1"> <thead> <tr> <th>Late Fee Code</th> <th>Large Entity</th> <th>Small Fee Code</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>\$ 130</td><td>205</td><td>\$ 65</td><td>Surcharge - late fee or oath</td><td>\$</td></tr> <tr><td>127</td><td>\$ 50</td><td>227</td><td>\$ 25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td>\$</td></tr> <tr><td>147</td><td>\$2,520</td><td>147</td><td>\$2,520</td><td>Request for Reexamination</td><td>\$</td></tr> <tr><td>112</td><td>\$920*</td><td>112</td><td>\$920*</td><td>Requesting publication of SIR prior to Examiner action</td><td>\$</td></tr> <tr><td>113</td><td>\$1840*</td><td>113</td><td>\$1840*</td><td>Requesting publication of SIR after Examiner action</td><td>\$</td></tr> <tr><td>115</td><td>\$ 110</td><td>215</td><td>\$ 55</td><td>Extension for reply within first month</td><td>\$</td></tr> <tr><td>116</td><td>\$ 390</td><td>216</td><td>\$ 195</td><td>Extension for reply within second month</td><td>\$</td></tr> <tr><td>117</td><td>\$ 890</td><td>217</td><td>\$ 445</td><td>Extension for reply within third month</td><td>\$</td></tr> <tr><td>118</td><td>\$1,390</td><td>218</td><td>\$ 695</td><td>Extension for reply within fourth month</td><td>\$</td></tr> <tr><td>128</td><td>\$1,890</td><td>228</td><td>\$ 945</td><td>Extension for reply within fifth month</td><td>\$</td></tr> <tr><td>119</td><td>\$ 310</td><td>219</td><td>\$ 155</td><td>Notice of Appeal</td><td>\$</td></tr> <tr><td>120</td><td>\$ 310</td><td>220</td><td>\$ 155</td><td>Filing a brief in support of an appeal</td><td>\$</td></tr> <tr><td>121</td><td>\$ 270</td><td>221</td><td>\$ 135</td><td>Request for oral hearing</td><td>\$</td></tr> <tr><td>140</td><td>\$ 110</td><td>240</td><td>\$ 55</td><td>Petition to revive - unavoidable</td><td>\$</td></tr> <tr><td>141</td><td>\$1,240</td><td>241</td><td>\$ 620</td><td>Petition to revive - unintentional</td><td>\$</td></tr> <tr><td>142</td><td>\$1,240</td><td>242</td><td>\$ 620</td><td>Utility issue fee (or reissue)</td><td>\$</td></tr> <tr><td>143</td><td>\$ 440</td><td>243</td><td>\$ 220</td><td>Design issue fee</td><td>\$</td></tr> <tr><td>144</td><td>\$ 600</td><td>244</td><td>\$ 300</td><td>Plant issue fee</td><td>\$</td></tr> <tr><td>122</td><td>\$ 130</td><td>122</td><td>\$ 130</td><td>Petitions to the Commissioner</td><td>\$</td></tr> <tr><td>123</td><td>\$ 50</td><td>123</td><td>\$ 50</td><td>Petitions related to provisional applications</td><td>\$</td></tr> <tr><td>126</td><td>\$ 240</td><td>126</td><td>\$ 240</td><td>Submission of Information Disclosure Statement</td><td>\$</td></tr> <tr><td>581</td><td>\$ 40</td><td>581</td><td>\$ 40</td><td>Recording each patent assignment per property (times number of properties)</td><td>\$40</td></tr> <tr><td>146</td><td>\$ 710</td><td>246</td><td>\$ 355</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td>\$</td></tr> <tr><td>179</td><td>\$ 690</td><td>279</td><td>\$ 345</td><td>Request for Continued Examination (RCE)</td><td>\$</td></tr> <tr><td>169</td><td>\$ 900</td><td>169</td><td>\$ 900</td><td>Request for expedited examination of a design application</td><td>\$</td></tr> <tr><td colspan="5">Other fee (specify):</td><td>\$</td></tr> <tr><td colspan="5">Other fee (specify):</td><td>\$</td></tr> <tr><td colspan="5">* Reduced by Basic Filing Fee Paid</td><td></td></tr> <tr><td colspan="5"><b>Subtotal (3)</b></td><td>\$ 40</td></tr> </tbody> </table> |       |             |          |       |             | Late Fee Code | Large Entity | Small Fee Code | Small Entity | Fee Description | Fee Paid | 105                | \$ 130 | 205 | \$ 65 | Surcharge - late fee or oath | \$                    | 127             | \$ 50 | 227  | \$ 25                  | Surcharge - late provisional filing fee or cover sheet | \$    | 147                               | \$2,520 | 147    | \$2,520                               | Request for Reexamination | \$    | 112   | \$920* | 112  | \$920*  | Requesting publication of SIR prior to Examiner action | \$ | 113 | \$1840*  | 113 | \$1840* | Requesting publication of SIR after Examiner action | \$ | 115 | \$ 110         | 215                   | \$ 55          | Extension for reply within first month | \$              | 116      | \$ 390 | 216   | \$ 195 | Extension for reply within second month | \$                 | 117 | \$ 890 | 217   | \$ 445 | Extension for reply within third month | \$                | 118 | \$1,390 | 218   | \$ 695 | Extension for reply within fourth month | \$               | 128 | \$1,890 | 228   | \$ 945 | Extension for reply within fifth month | \$                 | 119 | \$ 310 | 219   | \$ 155 | Notice of Appeal | \$                     | 120 | \$ 310              | 220 | \$ 155 | Filing a brief in support of an appeal | \$ | 121   | \$ 270 | 221 | \$ 135 | Request for oral hearing | \$ | 140 | \$ 110 | 240 | \$ 55 | Petition to revive - unavoidable | \$ | 141 | \$1,240 | 241 | \$ 620 | Petition to revive - unintentional | \$ | 142 | \$1,240 | 242 | \$ 620 | Utility issue fee (or reissue) | \$ | 143 | \$ 440 | 243 | \$ 220 | Design issue fee | \$ | 144 | \$ 600 | 244 | \$ 300 | Plant issue fee | \$ | 122 | \$ 130 | 122 | \$ 130 | Petitions to the Commissioner | \$ | 123 | \$ 50 | 123 | \$ 50 | Petitions related to provisional applications | \$ | 126 | \$ 240 | 126 | \$ 240 | Submission of Information Disclosure Statement | \$ | 581 | \$ 40 | 581 | \$ 40 | Recording each patent assignment per property (times number of properties) | \$40 | 146 | \$ 710 | 246 | \$ 355 | Filing a submission after final rejection (37 CFR 1.129(a)) | \$ | 179 | \$ 690 | 279 | \$ 345 | Request for Continued Examination (RCE) | \$ | 169 | \$ 900 | 169 | \$ 900 | Request for expedited examination of a design application | \$ | Other fee (specify): |  |  |  |  | \$ | Other fee (specify): |  |  |  |  | \$ | * Reduced by Basic Filing Fee Paid |  |  |  |  |  | <b>Subtotal (3)</b> |  |  |  |  | \$ 40 |
| Late Fee Code   | Large Entity          | Small Fee Code  | Small Entity          | Fee Description  | Fee Paid |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 105   | \$ 130                | 205   | \$ 65                 | Surcharge - late fee or oath   | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 127   | \$ 50                 | 227   | \$ 25                 | Surcharge - late provisional filing fee or cover sheet                     | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 147   | \$2,520               | 147   | \$2,520               | Request for Reexamination  | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 112   | \$920*                | 112   | \$920*                | Requesting publication of SIR prior to Examiner action                     | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 113   | \$1840*               | 113   | \$1840*               | Requesting publication of SIR after Examiner action                        | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 115   | \$ 110                | 215   | \$ 55                 | Extension for reply within first month                                     | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 116   | \$ 390                | 216   | \$ 195                | Extension for reply within second month                                    | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 117   | \$ 890                | 217   | \$ 445                | Extension for reply within third month                                     | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 118   | \$1,390               | 218   | \$ 695                | Extension for reply within fourth month                                    | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 128   | \$1,890               | 228   | \$ 945                | Extension for reply within fifth month                                     | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 119   | \$ 310                | 219   | \$ 155                | Notice of Appeal   | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 120   | \$ 310                | 220   | \$ 155                | Filing a brief in support of an appeal                                     | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 121   | \$ 270                | 221   | \$ 135                | Request for oral hearing   | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 140   | \$ 110                | 240   | \$ 55                 | Petition to revive - unavoidable   | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 141   | \$1,240               | 241   | \$ 620                | Petition to revive - unintentional   | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 142   | \$1,240               | 242   | \$ 620                | Utility issue fee (or reissue)   | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 143   | \$ 440                | 243   | \$ 220                | Design issue fee   | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 144   | \$ 600                | 244   | \$ 300                | Plant issue fee  | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 122   | \$ 130                | 122   | \$ 130                | Petitions to the Commissioner  | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 123   | \$ 50                 | 123   | \$ 50                 | Petitions related to provisional applications                              | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 126   | \$ 240                | 126   | \$ 240                | Submission of Information Disclosure Statement                             | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 581   | \$ 40                 | 581   | \$ 40                 | Recording each patent assignment per property (times number of properties) | \$40     |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 146   | \$ 710                | 246   | \$ 355                | Filing a submission after final rejection (37 CFR 1.129(a))                | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 179   | \$ 690                | 279   | \$ 345                | Request for Continued Examination (RCE)                                    | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 169   | \$ 900                | 169   | \$ 900                | Request for expedited examination of a design application                  | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| Other fee (specify):  |                       |   |                       |  | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| Other fee (specify):  |                       |   |                       |  | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| * Reduced by Basic Filing Fee Paid  |                       |   |                       |  |          |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| <b>Subtotal (3)</b>   |                       |   |                       |  | \$ 40    |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| <b>2. Extra Claim Fees</b><br><table border="1"> <thead> <tr> <th>Claims</th> <th>Extra</th> <th>Fee (below)</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total</td> <td>20 - 20** =</td> <td>x \$</td> <td>= \$</td> </tr> <tr> <td>Indep.</td> <td>3 - 3** =</td> <td>x \$</td> <td>= \$</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td>\$</td> </tr> </tbody> </table> <p>**or number previously paid, if greater.</p> <p>For Reissues, see below</p> <table border="1"> <thead> <tr> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>\$ 18</td><td>\$ 9</td><td>Claims in excess of 20</td></tr> <tr><td>\$ 80</td><td>\$ 40</td><td>Independent claims in excess of 3</td></tr> <tr><td>\$ 270</td><td>\$ 135</td><td>Multiple dependent claim, if not paid</td></tr> <tr><td>\$ 80</td><td>\$ 40</td><td>**Reissue independent claims over original patent</td></tr> <tr><td>\$ 18</td><td>\$ 9</td><td>**Reissue claims in excess of 20 and over original patent</td></tr> <tr><td colspan="2"><b>Subtotal (2)</b></td><td>\$</td></tr> </tbody> </table> |                       |   |                       |  |          | Claims   | Extra | Fee (below) | Fee Paid | Total | 20 - 20** = | x \$          | = \$         | Indep.         | 3 - 3** =    | x \$            | = \$     | Multiple Dependent |        |     | \$    | Large Entity Fee (\$)        | Small Entity Fee (\$) | Fee Description | \$ 18 | \$ 9 | Claims in excess of 20 | \$ 80  | \$ 40 | Independent claims in excess of 3 | \$ 270  | \$ 135 | Multiple dependent claim, if not paid | \$ 80                     | \$ 40 | **Reissue independent claims over original patent | \$ 18  | \$ 9 | **Reissue claims in excess of 20 and over original patent | <b>Subtotal (2)</b>                                    |    | \$  | <b>1. Basic Filing Fee</b><br><table border="1"> <thead> <tr> <th>Large Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>\$710</td><td>201</td><td>\$355</td><td>Utility Filing Fee</td><td>\$</td></tr> <tr><td>106</td><td>\$130</td><td>206</td><td>\$ 65</td><td>Design Filing Fee</td><td>\$</td></tr> <tr><td>107</td><td>\$490</td><td>207</td><td>\$245</td><td>Plant Filing Fee</td><td>\$</td></tr> <tr><td>108</td><td>\$710</td><td>208</td><td>\$355</td><td>Reissue Filing Fee</td><td>\$</td></tr> <tr><td>114</td><td>\$150</td><td>214</td><td>\$ 75</td><td>Provisional Filing Fee</td><td>\$</td></tr> <tr><td colspan="5"><b>Subtotal (1)</b></td><td>\$355</td></tr> </tbody> </table> |     |         |   |    |     | Large Fee Code | Large Entity Fee (\$) | Small Fee Code | Small Entity Fee (\$)                  | Fee Description | Fee Paid | 101    | \$710 | 201    | \$355                                   | Utility Filing Fee | \$  | 106    | \$130 | 206    | \$ 65                                  | Design Filing Fee | \$  | 107     | \$490 | 207    | \$245                                   | Plant Filing Fee | \$  | 108     | \$710 | 208    | \$355                                  | Reissue Filing Fee | \$  | 114    | \$150 | 214    | \$ 75            | Provisional Filing Fee | \$  | <b>Subtotal (1)</b> |     |        |  |    | \$355 |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| Claims  | Extra                 | Fee (below)   | Fee Paid              |  |          |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| Total   | 20 - 20** =           | x \$  | = \$                  |  |          |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| Indep.  | 3 - 3** =             | x \$  | = \$                  |  |          |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| Multiple Dependent  |                       |   | \$                    |  |          |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| Large Entity Fee (\$)   | Small Entity Fee (\$) | Fee Description   |                       |  |          |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| \$ 18   | \$ 9                  | Claims in excess of 20                                    |                       |  |          |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| \$ 80   | \$ 40                 | Independent claims in excess of 3                         |                       |  |          |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| \$ 270  | \$ 135                | Multiple dependent claim, if not paid                     |                       |  |          |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| \$ 80   | \$ 40                 | **Reissue independent claims over original patent         |                       |  |          |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| \$ 18   | \$ 9                  | **Reissue claims in excess of 20 and over original patent |                       |  |          |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| <b>Subtotal (2)</b>   |                       | \$  |                       |  |          |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| Large Fee Code  | Large Entity Fee (\$) | Small Fee Code  | Small Entity Fee (\$) | Fee Description  | Fee Paid |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 101   | \$710                 | 201   | \$355                 | Utility Filing Fee   | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 106   | \$130                 | 206   | \$ 65                 | Design Filing Fee  | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 107   | \$490                 | 207   | \$245                 | Plant Filing Fee   | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 108   | \$710                 | 208   | \$355                 | Reissue Filing Fee   | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| 114   | \$150                 | 214   | \$ 75                 | Provisional Filing Fee   | \$       |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |
| <b>Subtotal (1)</b>   |                       |   |                       |  | \$355    |  |       |             |          |       |             |               |              |                |              |                 |          |                    |        |     |       |                              |                       |                 |       |      |                        |  |       |                                   |         |        |                                       |                           |       |   |        |      |   |  |    |     |  |     |         |   |    |     |                |                       |                |  |                 |          |        |       |        |   |                    |     |        |       |        |  |                   |     |         |       |        |   |                  |     |         |       |        |  |                    |     |        |       |        |                  |                        |     |                     |     |        |  |    |       |        |     |        |                          |    |     |        |     |       |                                  |    |     |         |     |        |                                    |    |     |         |     |        |                                |    |     |        |     |        |                  |    |     |        |     |        |                 |    |     |        |     |        |                               |    |     |       |     |       |   |    |     |        |     |        |  |    |     |       |     |       |  |      |     |        |     |        |   |    |     |        |     |        |   |    |     |        |     |        |   |    |                      |  |  |  |  |    |                      |  |  |  |  |    |                                    |  |  |  |  |  |                     |  |  |  |  |       |

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